

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>[Signature]</i>	10029	2/4/02
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	10029	4/23/02

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date	Claim	Date	Claim	Date
1		51		101	
2		52		102	
3		53		103	
4		54		104	
5		55		105	
6		56		106	
7		57		107	
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11		61		111	
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46		96		146	
47		97		147	
48		98		148	
49		99		149	
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If more than 150 claims or 10 actions  
staple additional sheet here

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